

DECLARATION COMBINED WITH POWER OF ATTORNEY

Page 1 of 3

Attorney Docket No. 7533

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled LOW VISCOSITY BILAYER DISRUPTED SOFTENING COMPOSITION FOR TISSUE PAPER the specification of which

(check ☐ is attached hereto.
one) ☒ was filed on June 2, 2000 as United States Application No. or
PCT International Application Serial No. _____
and was amended on _____

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56.

I hereby claim foreign priority benefits under Title 35 United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)Priority Claimed

(Number)	(Country)	(Day/Month/Year Filed)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

60/137,336	June 3, 1999	60/104,371	October 15, 1998
Application Serial No.	Filing Date	Application Serial No.	Filing Date

I hereby claim the benefit under Title 35 United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35 United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (If applicable)

As named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Atty Name	Atty Reg Number	Associate Power of Attorney Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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Jacobus C. Rasser	37,043	
T. David Reed	32,931	
Timothy B. Guffey	41,048	
Eileen L. Hughett	34,352	
Emelyn L. Hiland	41,501	
Linda M. Sivik	44,982	
Donald E. Hasse	29,387	
Larry L. Huston	32,994	
Julia A. Glazer	41,783	
Vladimir Vitenberg	42,204	

SEND CORRESPONDENCE TO:

Attorney or Agent's Name: Donald E. Hasse

The Procter & Gamble Company

(513) 634-1620

Company Name

Phone No.

6100 Center Hill

Cincinnati

Ohio

45224

Street

City

State

Zip Code

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first joint inventor David D. McKay

Inventor's signature

David D. McKay

Aug 21 - 2000

Date

Residence 5670 St. Rt. 73 W, Wilmington, Ohio 45177

Citizenship U.S.A.

Post Office Address 5670 St. Rt. 73 W

Wilmington, Ohio 45177

Full name of second joint inventor, if any John Ernest Rice

Inventor's signature

Date

Residence 3508 Beekley Woods Drive, Sharonville, Ohio 45241

Citizenship U.S.A.

Post Office Address 3508 Beekley Woods Drive

Sharonville, Ohio 45241

Full name of third joint inventor, if any Kenneth Douglas Vinson

Inventor's signature

Kenneth Douglas Vinson

12 July 00

Date

Residence 303 Wyoming Avenue, Cincinnati, Ohio 45215

Citizenship U.S.A.

Post Office Address 303 Wyoming Avenue

Cincinnati, Ohio 45215

Full name of fourth joint inventor, if any James Robert McFarland

Inventor's signature

James Robert McFarland

7/6/00

Date

Residence 3770 Aylesboro Avenue, Cincinnati, Ohio 45208

Citizenship U.S.A.

Post Office Address 3770 Aylesboro Avenue

Cincinnati, Ohio 45208

Full name of fifth joint inventor, if any Amy Jo Hamilton

Inventor's signature

Amy Jo Hamilton

7/7/00

Date

Residence 5646 Santa Fe Trail, Mason, Ohio 45040

Citizenship U.S.A.

Post Office Address 5646 Santa Fe Trail

Mason, Ohio 45040

Full name of sixth joint inventor, if any Errol Hoffman Wahl

Inventor's signature *Errol Hoffman Wahl* Date 8/11/00

Residence 8021 Deersshadow Lane, Cincinnati, Ohio 45242

Citizenship U.S.A.

Post Office Address 8021 Deersshadow Lane
Cincinnati, Ohio 45242

Full name of seventh joint inventor, if any Gayle Marie Frankenbach

Inventor's signature *Gayle Marie Frankenbach* Date 8/14/00

Residence 10010 Voyager Lane, Cincinnati, Ohio 45252

Citizenship U.S.A.

Post Office Address 10010 Voyager Lane
Cincinnati, Ohio 45252

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Priority Claimed

(Number)

(Country)

(Day/Month/Year Filed)

☐

☐

Yes

No

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As named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

<u>Atty Name</u>	<u>Atty Reg Number.</u>	<u>Associate Power of Attorney Attached</u> [] Yes [X] No
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T. David Reed	32,931	
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Full name of sole or first joint inventor David D. McKay

Inventor's signature _____

Date _____

Residence 5670 St. Rt. 73 W, Wilmington, Ohio 45177

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Full name of second joint inventor, if any John Ernest Rice

Inventor's signature _____

Date _____

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~~Sharonville, Ohio 45241~~ 61462 Koenigstein im Ts., Germany

Full name of third joint inventor, if any Kenneth Douglas Vinson

Inventor's signature _____

Date _____

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Full name of fourth joint inventor, if any James Robert McFarland

Inventor's signature _____

Date _____

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Full name of fifth joint inventor, if any Amy Jo Hamilton

Inventor's signature _____

Date _____

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Citizenship U.S.A.

Post Office Address 5646 Santa Fe Trail

Mason, Ohio 45040

Full name of sixth joint inventor, if any Errol Hoffman Wahl

Inventor's signature _____

Date

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Citizenship U.S.A.

Post Office Address 8021 Deersshadow Lane

Cincinnati, Ohio 45242

Full name of seventh joint inventor, if any Gayle Marie Frankenbach

Inventor's signature _____

Date

Residence 10010 Voyager Lane, Cincinnati, Ohio 45252

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